		· Street September 1977	( ) exercit	<u> </u>	• • •	<del></del>			m. and a state					
PATENT APPLICATION FEE DETERMINATION RECO								Application or Docket Number						
_	Effective October 1, 2003								10/014 3/2					
		CLAIMS A	AS FILED (Colum		-	(Column 2)		SMALL TYPE	ENTITY	ÓR	OTHE	R THAN		
F	TOTAL CLAIM	HX					RATE	FEE	٦	RATE	FEE			
F	OR	NUMBER FILED		NUMBER EXTRA			BASIC F	€E 385.0	OR	BASIC FEE	770.00			
7	OTAL CHARGE	H8 "	#8 minus 20=		•		XS 9=	, i	OR	XS18=				
INDEPENDENT CLAIMS			( minus 3 =		•			X43=		-	V00			
<u>~</u>	ULTIPLE DEPE	NDENT CLAIM F	RESENT					.145-		OR				
* If the difference in column 1 is less than zero, enter *0" in column						column 2	,	+145=		JOR				
1 La frenchischer die Faffi in									· [	_JOR	TOTAL	L '		
(Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMA										SMALL				
AMENDMENT A		CLAIMS FEMAINING AFTER AMENDIMENT		HIGHE BANN OIVERP FOR CIAP	BER	PRESENT EXTRA		RATE	7.5 Til		RATE	ADDI- TIONAL FEE		
	Total	1.35	Minus	- 4	8	-		2.5 XS 6-	T	) OR	XS <del>ve</del> =			
	Independen:	· H	Minus	- 4	0	-		/#C X40=	<b>†</b>	ОЯ	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							- 1-: iz	<b>†</b>	OR	+299=			
								ATOR		i O D	TOTAL			
ADDIT, FEE L **** ADDIT, FEE L **** ADDIT, FEE L ***** ADDIT, FEE L ********************************											AUSH, FEE			
AMENDMENT B	13.38.6Q	CLAIMS REMAINING AFTER AMENOMENT		HIGHE NUMBI PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIO:: F::	֓֟֟֝֟֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֡֓֓֓֡֓	RATE	ADDI- TIONAL FEE		
	Total	- 35	Minus	<b>~</b> 48	<u>.</u>	=		X\$ 9=	Í	OR	X\$18=	-		
AME	Independent	• 4	Minus	••• (		- /	T	X43=,		OR	X.86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Γ	+145=		OR	+290=			
							` <u>L</u>	TOTAL		IOR ,	TOTAL DOTT, FEE			
(Column 1) (Column 2) (Column 3)												.		
5	6/5/06	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	ER ISLY	PRESENT EXTRA		RATE \	ADDI- TIONA' FEE		RATE	ADDI- TIONAL FEE		
	Total	. 35	Minus	- 48	3	-0	ſ	X\$ 9=		OR	X\$18=			
	Independent	. 4	Minus	-6	, ]	-0	1	X43≖	IV	OR	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							<b>→ 145</b> =	1	JA	+290=			
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								1	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	TOTAL			
	I the "Highest Nu	mber Previously Paid ber Previously Paid	id For IN THI	S SPACE is I	ess than	3, enter "3."		OIT. FEE	propristopa	. ^	DOM, FEEL ma 1.			